#### **NEVADA FINANCIAL DISCLOSURE STATEMENT**

(Attach additional sheets if necessary.)



DEAN HELLER SECRETARY OF STATE

| NAME Ed CU+2  | LENC                 | GTH OF RESIDEN  | ICE IN NEVADA   | 26 40  | L/5                 |   |
|---|----------------------|-----------------|---|--|---------------------|---|
| AILING ADDRESS PO 13 ox 23 2 LENGTH OF RESIDENCE IN DISTRICT WHERE I  |                      |                 | where řegi  | GISTERED TO  |                     |   |
| CITY, STATE, ZIP Cedarsille CA 96104  | VOTI                 | E 26 yea        | <u>√S</u><br>NRS 281.571(1  |  |                     |   |
| TELEPHONE 530 279-636/  |                      |                 | NRS 281.571(1   | )(a)   |                     |   |
| List all public offices for which this financial disclos  | sure statement is r  | required (NRS 2 | 81.571, Subsection ANNUAL all elected and appointed public officers | CANDIDATE (no later than the 10th day after the last day | to fill un<br>of an | DINTMENT<br>expired term<br>elected or<br>nted public |
|   | Annual               | Term or         | (no later than Jan. 15<br>each year)<br>NRS                         | candidate)<br>NRS  | (with               | officer<br>n 30 days)<br>NRS                          |
| Public Office   | Compensation         | Date Appointed  | 281.569(1)(b)<br>281.561(1)(b)                                      | 281.561(1)(a)  | 28                  | i.559(1)(a)   |
| ONSERVATION DISTRICT Supervisor   | \$ <u></u> _         | 1/03/05         | X   |  |                     |   |
|   | \$                   | <del>-,</del>   |   |  |                     |   |
|   | \$                   |                 |   | П  |                     | П   |
|   |                      |                 | <u> </u>  |  |                     | _   |
| Mutual Fund Investment<br>Certificates of Deposit<br>E. Lutz Design Studio LL<br>Ed Lutz, artist  | .C                   |                 |   |  |                     |   |
| List each creditor to whom you or a member of your deed of trust on real property which is not requivehicle for personal use was retained by seller] [N | ired to be listed be | elow, and (2) d |   |  |                     | a motor   |
|   |                      |                 |   |  | Self                | Househo<br>Membe                                      |
| none  |                      |                 |   |  |                     |   |
|   |                      |                 |   |  |                     |   |
|   |                      |                 |   |  |                     |   |
|   |                      |                 |   |  |                     |   |
|   |                      |                 |   |  |                     |   |
|   |                      |                 |   |  |                     |   |

| involved as a trustee, beneficiary of a taclass of stock or security representin [NRS 281.571, Subsection 1(f)]:   |   |   |   |  |                        |                     |
|--|---|---|---|--|------------------------|---------------------|
| price 257.511, oubsection t(i)].   |   |   |   |  | Self                   | Household<br>Member |
| E. Lutz Design Studi   | io LLC  |   |   |  | <b>V</b>               |                     |
| Ed Lutz Design Studi   |   | -,-                                       |   |  |                        |                     |
|  |   |   |   |  | _                      |                     |
|  |   |   |   |  |                        |                     |
|  |   | <del></del>                               |   |  |                        |                     |
|  |   |   |   |  |                        | ш                   |
| List specific location and particular use your household has a legal or beneficial state or an adjacent state [NRS 281.571, Specific Location 1920]  List the identity of donor and value of during the preceding taxable year [exconsanguinity or affinity; and (2) ceremoccasion if the donor does not have a selection 1(e)]: | al interest; (2) the fair Subsection 1(c)]: cation  w/// (L)ashoe  each gift received in cept (1) a gift received nonial gifts received for | excess of and from a person a birthday, v | of which is \$2,  9 / 6 2 /  aggregate value on who is relativedding, anniv | Particular Use of \$200 from ed to you within rersary, holiday | a donor<br>the third d | ed in this          |
| NONE   | Donor   |   |   |  | Value of \$            | f Gift              |
|  |   |   |   |  | \$                     |                     |
|  |   |   |   |  | \$                     |                     |
|  |   | •   |   |  | \$                     |                     |
| THE INFORMATION I HAVE PROVIDED Date://2 4 /05   |   | 0   |   |  |                        | ,<br>               |
|  |   |   |   |  |                        |                     |

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is

Revised 8/28/2003

# STATE OF NEVADA COMMISSION ON ETHICS

3476 Executive Pointe Way, Suite 16 Carson City, Nevada 89706-7946 (775) 687-5469 • FAX (775) 687-1279

# Acknowledgment of Ethical Standards for Public Officers

(Required by NRS 281.552)

I hereby acknowledge that I have read and understand the statutory ethical standards for public officers and public employees provided in NRS Chapter 281. I acknowledge that I have (check all that apply).

R reviewed the provisions of NRS Chapter 281 on-line from the Commission's website http://ethics.state.nv.us/

☐ reviewed the provisions of NRS Chapter 281 by requesting a copy thereof from the Commission office.

I understand that I am required to file this acknowledgment with the Nevada Commission on Ethics or the Secretary of State pursuant to NRS 281.561, and that refusal to execute and file this acknowledgment constitutes nonfeasance in office and is a ground for removal pursuant to NRS 283.440.

| Signature         | Ed Lutz-<br>Printed Name          | Ceda, J. // e, Ch 96104  Mailing Address |
|-------------------|-----------------------------------|--|
| 1/24/2005<br>Date | 530 274 - 636/<br>elephone Number | ax Number                                |

E-mail Address

### Office or Position

If you are required to file a financial disclosure statement pursuant to NRS 281.561, this form must accompany the first statement of financial disclosure you file once you are elected to public office. If you are an appointed public officer who will be entitled to receive less than \$6,000 per year of service and will not have to file a statement of financial disclosure, please file the form within 60 days of your appointment to office.

## Please return completed form to:

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#### Nevada Commission on Ethics 3476 Executive Pointe Way, Suite 16 Carson City, Nevada 89706-7946 775.687.5469 775.687.1279 fax

## Elected Public Officers

Nevada Secretary of State's Office, Elections Division

101 North Carson Street, Suite 3 Carson City, NV 89701

775.684.5705 775.684.5718 fax Pursuant to NRS 281.552, filing of this form is not required for candidates for public office.

Rev. 03/2004